

## HAWAII STATE ETHICS COMMISSION 1001 BISHOP STREET, PACIFIC TOWER 970 P.O. BOX 616, HONOLULU, HAWAII 96809

TEL.: 587-0460 FAX: 587-0470



LOBBYIST REGISTRATION FORM

(See back of this form for instructions)					
	(Type or	Print Clearly)	COMMISSION		
PART I LOBBYIST	,				
NAME(Last)	(First)	(Middle)		TELEPHONE	
KALAMA	CORBETT	A. K.		525-7732	
MAILING ADDRESS (Street)		(City)	(State)	(Zip Code)	
P. O. BOX 3200		HONOLULU	HAWAII	96847	
EMPLOYING ORGANIZATION (FIII I	n only if you are employed by a	business entity which has beer	retained to lobby	) TELEPHONE	
MAILING ADDRESS (Street)		(City)	(State)	(Zip Code)	
DARTH ORGANIZATION					
PART II ORGANIZATION  NAME OF ORGANIZATION YOU LO				TELEPHONE	
FIRST HAWAIIAN BAN	,			525-7000	
MAILING ADDRESS (Street)	N.	(City)	(State)	(Zip Code)	
P. O. BOX 3200		HONOLULU	HAWAII	96847	
NAME OF PERSON RESPONSIBLE				TELEPHONE	
CORBETT A. K. KALA		HON O EM ENDITIONEO OTATE		525-7732	
MAILING ADDRESS (Street)		(City)	(State)	(Zip Code)	
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P. O. BOX 3200		HONOLULU	HAWAII	96847	
PART III DESCRIPTION OF SUBJECTS UPON WHICH YOU EXPECT TO LOBBY					
Agriculture	Education	Human Services	⊠ S E	cience, Technology & conomic Development	
Communications & Public Utilities	Government Operations Finance	s &	· · · · · · · · · · · · · · · · · · ·	ourism & Recreation	
Consumer Protection & Commerce	Hawaiian Affairs	Labor & Employme	ont 🔀 T	ransportaion	
Culture, Arts, Historic Preservation	Health	Planning, Land & W Use Management	/ater C	Other: (indicate below)	
Ecology, Energy, Environmental Protection	Mousing Housing	Public Safety & Cor	rrections		
Elivioralional Fotodion					
PART IV CERTIFICATION	N OF LOBBYIST				
I hereby certify that the information furnished above is, to the best of my knowledge, correct and complete.					
auce			DEC - 6	2002	
(Signature of Lobbyist)			(Date)		
	N TO LODDY				
PART V AUTHORIZATIO	N 10 LOBBA	TITLE OF AUTHORIZING OFFICER OR PERSON REPRESENTED			
LILY K. YAO		VICE CHAIRMAN			
NAME OF ORGANIZATION (if applicable)				TELEPHONE	
FIRST HAWAIIAN BANK				525-7766	
MAILING ADDRESS (Street)		(City)	(State)	(Zip Code)	
P.O. BOX 3200		HONOLULU	HAWAII	96847	
I hereby authorize the above—named person to engage in lobbying activities on behalf of the undersigned.					
I nereby authorize the abo	ove-nameu person to en	gage in loopying dourinou	121231		

(Signature of Authorizing Officer of Person Represented)

(Date)